



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 8508

|  |   |                                  |   |  |                                |
|--|---|----------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/592,920   | <b>FILING or 371(c) DATE</b><br>09/15/2006<br><b>RULE</b>   | <b>CLASS</b><br>359              | <b>GROUP ART UNIT</b><br>2873   | <b>ATTORNEY DOCKET NO.</b><br>450100-05495 |                                |
| <b>APPLICANTS</b><br>Yoshito Iwasawa, Tokyo, JAPAN;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP05/02279 02/15/2005<br><b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2004-077211 03/17/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>06/27/2008 |   |                                  |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /JORDAN MARC SCHWARTZ/<br>Acknowledged Examiner's Signature                     | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWINGS</b><br>11  | <b>TOTAL CLAIMS</b><br>4                   | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>William S. Frommer<br>Frommer Lawrence & Haug<br>745 Fifth Avenue<br>New York, NY 10151<br>UNITED STATES   |   |                                  |   |  |                                |
| <b>TITLE</b><br>Zoom Lens and Image Pick-Up Apparatus Using Zoom Lens  |   |                                  |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>900  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |